



quick start summary 2015 annual benefits enrollment

Welcome to annual benefits enrollment for your County of Los Angeles *MegaFlex* benefits program. This year, annual benefits enrollment is October 1 through October 31, with your benefit elections taking effect January 1, 2015.

What's Changing for 2015

Premium Rates and Benefits Allowance

There are slight rate decreases in the Kaiser and Anthem Blue Cross medical plans, and DeltaCare dental plan. Delta Dental PPO rates will increase slightly.

The minimum *MegaFlex* benefits allowance will increase to \$1,158 from \$1,078.

You can find the premium rates and your individual monthly benefit allowance for the new plan year on the Personalized Enrollment Worksheet you received with this summary.

Redesigned Enrollment System

The new enrollment system, available at mylacountybenefits.com, has been redesigned with a new look, more features, and has everything you need to enroll.

\$500 HCSA Carryover Rule

In 2013, the IRS issued a \$500 carryover rule for unused funds in Health Care Spending Accounts (HCSA).

If you're enrolled in the HCSA and you don't claim all the monies you contributed for the plan year, you can carry over up to \$500 of your remaining balance to the next plan year.

To learn more, check out the new Spending Account eMagazine, available on the homepage at mylacountybenefits.com.

This new interactive tool can help you get the most out of your Spending Accounts. It even links to downloadable claim forms and a calculator that estimates your tax savings when you use a Spending Account.

Important Points to Consider

These benefits require documentation or may require your attention every year. Read through them to ensure you receive the benefits you want for 2015.

Elective Annual Leave Days for 2015

Elective annual leave days do not roll over to the next year. You must enroll during annual benefits enrollment to purchase elective annual leave days. See page 5 of the Enrollment Highlights Guide for more details.

Coverage for Eligible Family Members*

Scenario	Required Action
Switching medical plans	Provide Social Security numbers (SSN) for all eligible family members.
Adding eligible family members	Provide SSNs and required documents (birth/adoption/marriage certificate, etc.) within 10 calendar days from enrollment. Your children must be under age 26.
Family member is not eligible for coverage	You must drop coverage for an individual who is no longer eligible (such as when you divorce or end a domestic partnership).

** Your family member's enrollment is incomplete and pending until you provide an SSN or other necessary documentation. If you don't submit this information by the deadline, the pending enrollment will cancel and your family member will not have coverage for 2015.*

Health Care and Dependent Care Spending Accounts

- Neither account automatically rolls over to the next year; however, you may carry over up to \$500 in unused Health Care Spending Account funds to the next year.
- You must enroll during annual benefits enrollment if you want to participate in these accounts in 2015.
- The County will contribute up to \$375 a month to your Dependent Care Spending Account (based on your annual income). See page 6 of the Enrollment Highlights Guide for important rules and eligible dependents.

Medical Coverage Protection/Long-Term Disability (LTD) Health Insurance

Check your Personalized Enrollment Worksheet to see if you are eligible to enroll in 100% LTD health insurance. See page 5 of the Enrollment Highlights Guide for eligibility rules.

easy as 1...2...3 (and 4)

1. Decide if you want to enroll or make changes

- Review your enrollment materials and your Personalized Enrollment Worksheet and use the information and tools available at **mylacountybenefits.com**.
- Annual benefits enrollment is your chance to enroll in or change medical and dental plans as well as optional benefits, such as life, short-term disability, long-term disability, medical coverage protection (long-term disability health insurance), and accidental death and dismemberment insurance.
- You must take action (enroll) every year to:
 - Purchase elective annual leave days.
 - Participate in a Health Care and/or Dependent Care Spending Account.
- If you make no changes, all current benefits will continue at 2015 premium rates **except** elective annual leave days and Health Care or Dependent Care Spending Accounts, which will be cancelled on January 1, 2015.

2. Get ready to enroll

- See if the Social Security number (SSN) requirement applies to you:
 - If you stay in the same medical plan, **SSNs are required** for eligible family members you add to coverage.
 - If you change to a new medical plan, **SSNs are required** for all family members to be covered.
- Gather birth certificates and/or marriage certificate for family members you add to coverage.
- Visit **mylacountybenefits.com** to find helpful tools such as benefits and enrollment tutorials and SIB Imputed Income and Spending Account calculators.

3. Enroll online or by phone October 1 through October 31, 2014



Online – mylacountybenefits.com

- Log in using your employee number and PIN (see your Personalized Enrollment Worksheet for your PIN).
- Follow the Enrollment Steps.
- Click the yellow confirmation button.
- Print your confirmation statement before logging off. If you can't print, write down your confirmation number shown on the "Thank You" page.

By phone – 888-822-0487

- Follow the recorded instructions.
- Don't hang up until you hear "Your benefit elections have been confirmed and recorded," and have written down your confirmation number.
- If you don't receive a confirmation statement in the mail within seven days from the date you enroll, call the Benefits Hotline at 213-388-9982.

Provide all required documentation to the County Benefit Plan Administrator within 10 days from the date you enroll to guarantee coverage. If you are adding a dependent, please write your name, employee number, and your dependent's SSN on each document or certificate. You may submit your documents (or scanned files for upload or email) by:

- Computer upload: Use the "Upload" link in the "Documentation Required" section of your Personal Homepage
- Email: Attach scanned documents to email and send to documents@mylacountybenefits.com
- Fax: 310-788-8775
- Mail: Plan Administrator, P.O. Box 67128, Los Angeles, CA 90067

4. Other important information

- Review your 2015 benefits confirmation statement to ensure accuracy.
- You may not change your benefits after October 31, 2014, until the next annual benefits enrollment period. **Note:** Mid-year coverage changes are allowed only for a qualified change in family status (e.g., marriage, divorce, birth, or adoption) or work situation that affects your benefits.
- **You MUST remove an ex-spouse, ex-domestic partner, and any other ineligible family members from your medical and dental coverage.** See the *MegaFlex* Enrollment Highlights Guide for more information.
- The County reserves the right to take appropriate action against anyone who knowingly presents a false or fraudulent claim under the Plan, or who otherwise attempts to defraud the Plan, including (but not limited to) termination from participation in the Plan and of employment.
- If you have questions, call the Benefits Hotline between 8 a.m. and 4 p.m. (5 p.m. during annual benefits enrollment) at 213-388-9982.